

County: Milwaukee

Facility ID: 5642

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MILW COUNTY MHC REHAB CTR CENTRAL
9455 WATERTOWN PLANK ROAD

MILWAUKEE 53226 Phone:(414) 257-7339

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? Yes

Number of Beds Set Up and Staffed (12/31/04): 70

Total Licensed Bed Capacity (12/31/04): 70

Number of Residents on 12/31/04: 68

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

County

Skilled

No

No

Yes

67

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		17.6	
Home Health Care	No	-----	-----	-----	-----	1 - 4 Years		39.7	
Supp. Home Care-Personal Care	No	Developmental Disabilities	0.0	Under 65	82.4	More Than 4 Years		42.6	
Supp. Home Care-Household Services	No	Mental Illness (Org./Psy)	13.2	65 - 74	13.2			-----	
Day Services	No	Mental Illness (Other)	86.8	75 - 84	4.4			100.0	
Respite Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	0.0	*****			
Adult Day Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent			
Adult Day Health Care	No	Cancer	0.0		-----	Nursing Staff per 100 Residents			
Congregate Meals	No	Fractures	0.0		100.0	(12/31/04)			
Home Delivered Meals	No	Cardiovascular	0.0	65 & Over	17.6	-----			
Other Meals	No	Cerebrovascular	0.0		-----	RNs		22.2	
Transportation	No	Diabetes	0.0	Gender	%	LPNs		7.7	
Referral Service	No	Respiratory	0.0		-----	Nursing Assistants,			
Other Services	No	Other Medical Conditions	0.0	Male	77.9	Aides, & Orderlies			
Provide Day Programming for				Female	22.1	53.8			
Mentally Ill	Yes	-----	-----		-----				
Provide Day Programming for		100.0	-----		-----				
Developmentally Disabled	No		100.0		100.0				

Method of Reimbursement

Medicare (Title 18)				Medicaid (Title 19)				Other				Private Pay		Family Care		Managed Care					
		Per Diem (\$)		Per Diem (\$)				Per Diem (\$)		Per Diem (\$)		Per Diem (\$)		Per Diem (\$)		Per Diem (\$)		Total Resi- dents	% Of All		
Level of Care	No.	%		No.	%		No.	%		No.	%		No.	%		No.	%				
Int. Skilled Care	0	0.0	0	2	2.9	146	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.9	
Skilled Care	0	0.0	0	66	97.1	124	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	66	97.1	
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	0	0.0		68	100.0		0	0.0		0	0.0		0	0.0		0	0.0		68	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	0.0	Bathing	54.4	33.8	11.8	68
Private Home/With Home Health	0.0	Dressing	70.6	25.0	4.4	68
Other Nursing Homes	5.6	Transferring	92.6	4.4	2.9	68
Acute Care Hospitals	0.0	Toilet Use	80.9	16.2	2.9	68
Psych. Hosp.-MR/DD Facilities	88.9	Eating	76.5	23.5	0.0	68
Rehabilitation Hospitals	0.0	*****				
Other Locations	5.6					
Total Number of Admissions	18	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	4.4	Receiving Respiratory Care	0.0	
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	20.6	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	5.0	Occ/Freq. Incontinent of Bowel	10.3	Receiving Suctioning	0.0	
Other Nursing Homes	10.0	Mobility		Receiving Ostomy Care	0.0	
Acute Care Hospitals	30.0			Receiving Tube Feeding	0.0	
Psych. Hosp.-MR/DD Facilities	15.0			Receiving Mechanically Altered Diets	0.0	
Rehabilitation Hospitals	0.0	Physically Restrained	1.5			
Other Locations	35.0	Skin Care		Other Resident Characteristics		
Deaths	5.0	With Pressure Sores	2.9	Have Advance Directives	1.5	
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	20					Receiving Psychoactive Drugs 100.0

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities						

	This Facility	Other Hospital-Based Facilities		All Facilities		
	%	%	Ratio	%	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	93.7	91.7	1.02	88.8	1.05	
Current Residents from In-County	100.0	85.3	1.17	77.4	1.29	
Admissions from In-County, Still Residing	66.7	14.1	4.74	19.4	3.44	
Admissions/Average Daily Census	26.9	213.7	0.13	146.5	0.18	
Discharges/Average Daily Census	29.9	214.9	0.14	148.0	0.20	
Discharges To Private Residence/Average Daily Census	1.5	119.8	0.01	66.9	0.02	
Residents Receiving Skilled Care	100.0	96.2	1.04	89.9	1.11	
Residents Aged 65 and Older	17.6	90.7	0.19	87.9	0.20	
Title 19 (Medicaid) Funded Residents	100.0	66.8	1.50	66.1	1.51	
Private Pay Funded Residents	0.0	22.6	0.00	20.6	0.00	
Developmentally Disabled Residents	0.0	1.4	0.00	6.0	0.00	
Mentally Ill Residents	100.0	32.7	3.06	33.6	2.98	
General Medical Service Residents	0.0	22.0	0.00	21.1	0.00	
Impaired ADL (Mean)*	15.3	49.1	0.31	49.4	0.31	
Psychological Problems	100.0	53.5	1.87	57.7	1.73	
Nursing Care Required (Mean)*	0.4	7.4	0.05	7.4	0.05	